



APPEAL TO THE BOARD OF APPEALS

Please check the appropriate box below:

Building/Fire/Energy Code Electrical Code Mechanical/Plumbing/Fuel Gas Code

Please check the appropriate box below to indicate the type of appeal you are filing. Complete page 2 disclosure form. Provide all information required to process your request (Application fee of \$100.00 must accompany application)

- Appeal of Building Official/Fire Marshall's Interpretation/Decision, or
 - Determination of Alternate Materials and/or Methods of Construction
- (Attach all necessary backup documents to clarify specific code sections or code requirements appealing; or technical information supporting alternate materials and/or methods of construction)

DATE OF APPEAL: _____

REQUEST INFORMATION (If appeal is applicable to a location):

Location: _____

Subdivision: _____ Lot: _____ Block: _____

APPLICANT/OWNER INFORMATION:

Key Contact: _____ Phone No: _____ Fax No: _____

Address: _____

City: _____ State: _____ Zip Code: _____

*The owner's signature is required on this application and must be notarized, whether a single owner or a corporation

*This is to certify that I/we, the undersigned, am/are the sole owner(s) (if applicant is not the owner, the applicant must be the owner's authorized agent – attach notarized agent letter) of the property described above on the date of this application, and have read and understood the Disclosure of Interest Form.

Owner (please print) _____ (signature) _____

Address: _____ Phone No: _____ Fax No: _____

City: _____ State: _____ Zip Code: _____

Corporation/Partnership/Owner: _____

Address: _____ Phone No: _____ Fax No: _____

City: _____ State: _____ Zip Code: _____

NOTARY STATEMENT (All Signatures Must be Notarized)

Before me, the undersigned authority, on this day personally appeared _____

Known to me to be the person whose name is subscribed to the above and foregoing instrument, and acknowledged to me that he executed the same for the purposes and consideration expressed and the capacity therein stated. Given under my hand and seal of office on this ____ day of _____, 200 ____.

Notary Public in and for the State of Texas.

My Commission expires: _____



**CITY OF ARLINGTON
DISCLOSURE OF INTERESTS**

Article XII, Code of Ethics, of the "Administration" Chapter of the Code of the City of Arlington, Section 12.06, requires all persons seeking City Council, Zoning Board of Adjustment, or Planning and Zoning Commission consideration or action concerning any application for rezoning, plat approval, special exception, variance or similar application requiring action by the Planning and Zoning Commission or Zoning Board of Adjustment, to provide the following information. The applicant and the owner shall both file statements in those cases where the applicant does not own the property which is the subject of consideration or action. Every question must be answered. If the question is not applicable, answer with "N/A".

DISCLOSURE QUESTIONS

- A. Do you believe that a City official* or City employee** may have a conflict of interest in the property or application referenced on the reverse side? Yes No
- B. If so, state the name of each City official or employee of the City of Arlington known by you that may have a conflict of interest in the property or application referenced on the reverse side.

Name _____

Council, Board, Commission or City Department _____

- C. State all information upon which you base this belief (use additional paper, if necessary).

I certify that all information provided is true and correct as of the date of this statement, that I have not knowingly withheld disclosure of any information requested; and that supplemental statements will be promptly submitted to the City of Arlington, Texas, as changes occur.

Name of Certifying Person

Title of Certifying Person

Signature of Certifying Person

Date

*Mayor, City Council members, Planning and Zoning Commission members, and Zoning Board of Adjustment members.

**City Manager, Deputy City Manager, City Attorney, and all department heads.